DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer No or Bar Code				OR X	Corresp	ondence address below
Name: Ward & Olivo						
Address: Suite 300						
Address: 382 Springfield Avenue					·	
City: Summit	1		State: No	ew Jersey	ZIP:	07901
Country: U.S.A.	country: U.S.A. Telephone: (908) 2				Fax:	(908) 277-6373
I hereby declare that all statements made herein of are believed to be true; and further that these statements are punishable by fine or imprisonment, or validity of the application or any patent issued there	both, under 18					
NAME OF SOLE OR FIRST INVENTOR	:		A petition	has been	filed fo	r this unsigned inventor
Given Name Lewis			Family Name Illingworth or Surname			
(first and middle [if any]) Inventor's Signature					D	ate Thousand
Residence: City Kensington		State NI	1 0	ountry USA		Sitizenship USA
Mailing Address 14 Laurel Lane						
Mailing Address						
	State NH		ZIP 03833			Country USA
NAME OF SECOND INVENTOR:			A petiti	on has bee	n filed	for this unsigned inventor
Given Name (first and middle [if any])			Family I or Surn			
Inventor's Signature				T		Date
Residence: City		State		Country		Citizenship
Mailing Address		<u>. </u>				
Mailing Address			- y			
City State			ZIP			Country
Additional inventors are being named on the		nental Addi	itional Inve	entor(s) sheet(s) PTO/	SB/02A attached hereto.

Please type a plus sign (+) inside this box -> [+]

PTO/SB/01 (10-00, Approved for use through 10/31/2002, OMB 0651-003; U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a waited OMB contains.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☐ Declaration Submitted with Initial Filing

OR

 □ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Num	ber	120-084		
First Named Inventor		Illingworth, Lewis		
COMPLE	TEIF	KNOWN		
Application Number		09 / 728,602		
Filing Date	12/	1/2000		
Group Art Unit	374	15		
Examiner Name	TB	A		

As a below named inventor, I here	by declare	that:				
My residence, mailing address, and	citizenship	are as state	d below next to my name	. .		
I believe I am the original, first and s names are listed below) of the subje	ole invento ct matter w	r (if only one hich is clain	e name is listed below) or ned and for which a pater	r an original, first and is sought on the	and joint inventor e invention entitle	(if plural d:
Lifting Platform						
the specification of which		(Tit	le of the Invention)			
is attached hereto						
OR			as United Sta	ates Application N	umber or PCT In	temational
was filed on (MM/DD/YYYY)	12/1/200	00			· (if a	onlicable)
Application Number 09/728,602 and was amended on (MM/DD/YYYY) (if applicable).						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.					aims, as	
I acknowledge the duty to disclose in-part applications, material inform PCT international filing date of the	information nation which continuatio	n which is m n became a n-in-part ap	aterial to patentability as vailable between the filing plication.	defined in 37 CF g date of the prior	R 1.56, including application and	for continuation the national or
I hereby claim foreign priority bene certificate, or 365(a) of any PCT in America, listed below and have certificate, or any PCT international	nternational also identif	application ied below.	which designated at lea by checking the box, a	ist one country of ny foreign applic	ner than the Unit ation for patent	or inventor's
Prior Foreign Application Number(s)	.,, .,	untry	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Cop	
,					0000	
☐ Additional foreign application	numbers ar	e listed on a	a supplemental priority da	ata sheet PTO/SE	3/02B attached he	ereto:
I hereby claim the benefit under	35 U.S.C.	119(e) of ar	ny United States provisio	nal application(s)	listed below.	
Application Number(s)		Filing Da	te (MM/DD/YYYY)	number supplen	al provisional app s are listed on a nental priority dat 3/02B attached he	a sheet

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comme the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/81 (10-

Approved for use through 10/31/2002. OMB 0651-00 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMER Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number 1995.

POWER OF ATTORNEY OR-**AUTHORIZATION OF AGENT**

Application Number	09/728,602				
Filing Date	12/1/2000				
First Named Inventor	Illingworth, Lewis				
Group Art Unit	3745				
Examiner Name	TBA				
Attorney Docket Number	120-084				

Practitioners at C OR X Practitioner(s) na			Place Customer Number Bar Code Label here			
Z. Tacadonor(e) no	Name	Reg	istration Number			
John W.	Olivo, Jr.	35,	5,634			
John F. V	John F. Ward		3,811			
	espondence address for the above-id ned Customer Number.	lentified a	pplication to:			
X Firm or Individual Name	Ward & Olivo					
Address	Suite 300		-			
Address	382 Springfield Avenue					
City	Summit	State	New Jersey Zip 07901			
Country	U.S.A.					
Telephone	(908) 277-3333	Fax	(908) 277-6373			
I am the: X Applicant/Inver	cord of the entire interest. See 37 CF	R 3.71. n PTO/SE	3/96).			
Assignee of re-	ler 37 CFR 3.73(b) is enclosed. (Form					
Statement und	SIGNATURE of Applicant or As					

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any come the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.